



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): GRIFFITHS, et al.			Docket No. VI/99-004.D
Serial No. 10/034,266	Filing Date 10/19/2001	Examiner IMAM, ALI M	Group Art Unit 3737
Invention: APPARATUS AND METHOD FOR CONTROLLING CONTRAST ENHANCED IMAGING PROCEDURES			
<p>I hereby certify that this <u>Request for Continued Examination; Petition for Extension of Time (1 month)</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>2/7/2005</u> (Date)</p> <p style="text-align: right;"><u>Page A. Cedarholm</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (Large Entity)					Docket No. VI/99-004.D					
In Re Application Of: GRIFFITHS, et al.										
Application No. 10/034,266	Filing Date 10/19/2001	Examiner IMAM, ALI M	Customer No. 21140	Group Art Unit 3737	Confirmation No. 9517					
Invention: APPARATUS AND METHOD FOR CONTROLLING CONTRAST ENHANCED IMAGING PROCEDURES										
<u>COMMISSIONER FOR PATENTS:</u> This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of <u>10/5/2004</u> in the above-identified application. <small style="margin-left: 100px;">Date</small>										
The requested extension is as follows (check time period desired): <input checked="" type="checkbox"/> One month <input type="checkbox"/> Two months <input type="checkbox"/> Three months <input type="checkbox"/> Four months <input type="checkbox"/> Five months from: _____ until: _____ <small style="margin-left: 100px;">Date</small> <small>Date</small>										
The fee for the extension of time is \$120 and is to be paid as follows: <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 13-2530 <input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 13-2530 <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
 <small style="margin-left: 100px;">Signature</small>			Dated: February 7, 2005							
Henry E. Bartony, Jr., Esquire MEDRAD, INC. One Medrad Drive Indianola, PA 15051			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td style="padding: 5px; text-align: center;">(Date)</td> </tr> <tr> <td style="padding: 5px; text-align: center;">Signature of Person Mailing Correspondence</td> </tr> <tr> <td style="padding: 5px; text-align: center;">Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____	(Date)	Signature of Person Mailing Correspondence	Typed or Printed Name of Person Mailing Correspondence
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CC:										